FORM (RF-3)

SUMMARY SHEET

	(1)	(2) Annual Premium	(3) Percent	
	Coverage	Volume (Illinois) *	Change (+or-) **	
	Automobile Liability Private			
	Passenger	**************************************		
	Commercial			
	Automobile Physical Damag		•	
	Private Passenger	·		
	Commercial		<u>EU</u>	
	iability Other Than Auto	RECEIV		
	Burglary and Theft	RE	· · · · · · · · · · · · · · · · · · ·	
	Glass		3	
2.	Fidelity	DEC 3 0 200		
5	Surety	OL-	INS	
E	Boiler and Machinery	STATE OF ILLIN	SURANCE	
F	Fire	STATE OF ILLIN STATE OF ILLIN DEPARTMENT OF IN SPRINGELEL	D	
E	Extended Coverage	DELY. SPKIII		
ı	nland Marine		4	
ŀ	Homeowners	2,042,434	7.9	
(Commercial Multi-Peril			
(Crop Hail			
) Other			
	Life of Insurance	Carrier Communication Communic	· · · · · · · · · · · · · · · · · · ·	
1	Does filing only apply to certa Classes? If so, specify: No	ain territory (territories) or o	certain	
	Brief description of filing. (If t	filing follows rates of an ac	lvisory	
	Organization, specify	والمعامل المعامل المعا	d austomor oradit factar and a	
	organization):		d customer credit factor and a	
reinstatement surcharge factor.Replaced advance submission discount with new advanced quote discount. Base rates and the Per-Pak discount revised. Reference to Per-Pak disc factor removes				
1	*Adjusted to reflect all prior ra **Change in Company's pren	ate changes.		
. !	rates.	ACHTS/ A Martinett		
			nsurance Company	
			ne of Company gulatory Filing Technician	
		i liane Udovich - Re	GUISTON/ Elling Tochnicion	

FORM (RF-3)

SUMMARY SHEET

(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **			
Automobile Liability Private	voidine (illinois)	- Onange (101)			
Passenger	2,603,145	0 ′			
Commercial	2,000,140				
Automobile Physical Damag					
Private Passenger	2,121,009	0			
Commercial	2,121,1000				
Liability Other Than Auto					
Burglary and Theft					
Glass					
Fidelity					
Surety					
Boiler and Machinery					
Fire					
Extended Coverage					
Inland Marine					
Homeowners	2,225,700	2.5			
Commercial Multi-Peril					
Crop Hail					
Other					
Life of Insurance					
Does filing only apply to cert Classes? If so, specify: No	• •	certain Dad + Residence Pro			
Brief description of filing. (If filing follows rates of an advisory Organization, specify					
organization):		ed customer credit factor and			
reinstatement surcharge factor and a persistency discount factor. Renewal discount removed.					
Revised endorsements. We have revised base rates, driver age factors, UM-PD base rates.					
*Adjusted to reflect all prior : **Change in Company's pre-	ate changes. mium level which will resu	It from application of new			
ratee					
rates.	ACUITY. A Mutual	Insurance Company			
rates.		Insurance Company me of Company			

(1)	(2) Annual Premium	(3) Percent
Coverage	Volume (Illinois)*	Change (+ or -) **
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto 4. Burglary and Theft 5. Glass		
6. Fidelity 7. Surety		
8. Boiler and Machinery 9. Fire 10. Extended Coverage		
11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril	\$393,157	-1.9%
14. Crop Hail 15. Other Line of Insurance		
Does filing only apply to certain If so, specify: Illinois has been	territory (territories)or n expanded into three terr	certain classes? itories as a result
of this filing. The filing application of filing. (If organization, specify organization)	filing follows rates of a	n advisory iling is to introduce
the Specialty Homeowners Program	in Illinois. The Specialt	y Homeowners program
is a revamp of the existing Mobilo shows a summary of the rate level making as a result of this filing Total Change for Standard: -3.6% Total Change for Preferred: 0.7%	owners program. Exhibit 5	in our filing package
Total Change for Standard: -3.6%	-C1	EIA-
Total Change for Preferred: 0.7%	REU	
Change in Standard Relativity: -4	.00	~ J(///2
Change in Preferred Relativity: - 0	0.4% NOV	3 0 2009
Age of Home Premium Adjustment: 7	. 4%	- ILLINOIS ANCE
Base Deductible Change: 0.2%	472	E OF INSO.
CAT Fee Change: 0.9%	SEPARTA	3 () 2000 TE OF ILLINOIS TENT OF INSURANCE MENT OF IELD MENT OF IELD
Enhancement Changes: -2.1%	OP.	
OVERALL CHANGE: -1.9%		
* Adjusted to reflect all prior in the state of the state	vel which will	ompany of Florida
Aille	Name of Compa	
	Jacqueline Aguilar - \	/ice President
	State Filings and Com	pliance
	Official - Tit	:le

H29219D

Change in Company'	s premium	or rate	level	produced	by r	ate
Revision effective	02-9-10					

	(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
	<u>ooverage</u>	<u> </u>	
1.	Automobile Liability Private Passenger Commercial		
2.	Automobile Physical Damage Private Passenger Commercial	RECEIVE	
3.	Liability Other Than Auto	DEC 0 3 2009	
3. 4.	Burglary and Theft	DEC 0 3 2000	
4 . 5.	Glass	STATE OF ILLINO STATE OF INSI DEPARTMENT OF INSI SPRINGFIELD	IS
6.	Fidelity	STATE OF INSL	JANO"
7.	Surety	DEPARTMENT OFFIELD	
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners	\$ 2,878,496.00	+6.10%
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
	es filing only apply to certain te sses? If so, specify:	rritory (territories) or cer	tain
org We	ef description of filing. (If filing anization, specify organization) are changing base rates acros bilization Factor Rating Rule): s all forms as well as P	Price
	n		

The Automobile Insurance Co. of Hartford, CT

Name of Company

Vice President

^{*} Adjusted to reflect all prior rate changes.

** Changes in Company's premium level which will result from application of new rates.

Change in Company's premiur revision effective 1/6/10		by rate _·
(1)	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
Coverage 1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial	RECEIV	ED
3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity		
7. Surety 8. Boiler and Machinery 9. Fire	OCT 2120 STATE OF ILI BTATE OF ILI BTATE OF ILI	INOIS INSURANCE
10. Extended Coverage 11. Inland Marine 12. Homeowners	10,296,984	0.0%
13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance		
Does filing only apply to certain If so, specify: No	territory (territories)c	or certain classes?
717777		
Brief description of filing. (If organization	n): Revised base rates,	Superior Home discount,
Home Policy Plus discount, Loss Ex	perience Rating Plan, ea	arthquake rates
* Adjusted to reflect all prior r ** Change in Company's premium lev result from application of new	el which will	
	Economy Fire and Casua Name of Compa	
 	Richard Lonardo, Vice Official - Ti	
H29219D		

Theeked with co

Change in Company's premium revision effective $\frac{1}{6}$ 10		by rate
(1)	(2)	(3)
Coverage	Annual Premium Volume (Illinois)*	Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage	- 61	EIVED
Private Passenger	- OEU	<u> </u>
Commercial		
3. Liability Other Than Auto 4. Burglary and Theft		2.1 2009
5. Glass	nc1	31 200
6. Fidelity	<u> </u>	E OF ILLINOIS ENT OF INSURANCE ENT OF INSURANCE SPRINGFIELD
7. Surety		OF ILLINSURANCE
8. Boiler and Machinery	STA	ENT OFIELD
9. Fire	DEPARIN	SPRINGFI
10. Extended Coverage		
11. Inland Marine		
12. Homeowners	25,523,306	0.0%
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Line of Insurance		
Does filing only apply to certain If so, specify: No	territory (territories)o	r certain classes?
	. <u> </u>	
Brief description of filing. (If organization, specify organization) Home Policy Plus discount, Loss Ex	n): Revised base rates,	Superior Home discount,
mone rorrey rrab draeodate, hoss in	portone morns rimi, ou	z onquano zaooo
* Adjusted to reflect all prior r ** Change in Company's premium lev result from application of new	vel which will	ance Company
-	Name of Compa	
	Matthe OI Compa	21.LY
	Richard Lonardo, Vice	-President
	Official - Ti	
H29219D		

(hecked with co.

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate	level produced by rate revision
effective 12/16/2009 .	

- -	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois) *	Change (+or-) **
1.	Automobile Liability Private		
	Passenger		
	Commercial		
2	Automobile Physical Damag		
	Private Passenger		•
	Commercial		-WED
3.	Liability Other Than Auto	SEC	EIVED
4.	Burglary and Theft	RE	
5.	Glass		
6.	Fidelity	ne:	C 0 4 2009
7.	Surety		
8.	Boiler and Machinery	0787	TE OF ILLINOIS IENT OF INSURANCE SPRINGFIELD
9.	Fire	SIA	ENT OF INSU
10.	Extended Coverage	DEFAIT	SPRING
11.	Inland Marine		
12.	Homeowners	0.024.007	4.70/
13.	Commercial Multi-Peril	9,831,807	1.7%
13. 14.		**************************************	
1 4 . 15.	Crop Hail		
15.	Other Life of Insurance		
_	Life of insurance		
•	Does filing only apply to certa Classes? If so,	in territory (territories) or	certain
	specify: No		
	Specify.		
	Brief description of filing. (If fi Organization, specify organization): and Sump Overflow coverage for a	This filing contains a ra	te decrease for Water Back Up
	decrease in the rate charged for a		0 04 20 (Form HO 00 03).
	*Adjusted to reflect all prior ra **Change in Company's prem		t from application of new
	rates.		-
			e Company of Illinois
			ne of Company
		Steven J. Walsh, V	
			Official – Title

2

3. 4. 5. 6. 7. 8. 9.



Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

(1)	(2) Annual Premium	(3) Percent
Coverage	- Volume (Illinois) *	Change (+or-) **
Automobile Liability Priv	ate	
Passenger		
Commercial		<u> </u>
Automobile Physical Da	mag	
Private Passenger		
Commercial		
Liability Other Than Aut	0	
Burglary and Theft		
Glass		
Fidelity		
Surety		
Boiler and Machinery		
Fire		
Extended Coverage		
Inland Marine	4000 004	4.00/
Homeowners	\$809,804	+1.9%
Commercial Multi-Peril		
Crop Hail	***************************************	
Other Life of Insurance		***
Life of insurance	;	
Does filing only apply to	certain territory (territories) or	certain
Classes? If so,	• •	
specify:	No	
· · ·		

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

replacement of current endorsements, introduction of new endorsements; introducing a stand alone Condominium policy and NEA member discount, elimination of Inflation Guard discount.

> Horace Mann Insurance Company Name of Company Jenny Hester - Product Analyst Official - Title

Renised

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or r	ate level produced by rate revision
effective 02/01/2010	

-	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private		
	Passenger		
	Commercial		
2	Automobile Physical Damag		
	Private Passenger		•
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	,	
10.	Extended Coverage		
11.	Inland Marine	A =10.001	
12.	Homeowners	\$512,084	+0.9%
13.	Commercial Multi-Peril		
14. 15.	Crop Hail Other		
15.	Life of Insurance		
	Life of filsulative		
•	Does filing only apply to certain	in territory (territories) or	certain
	Classes? If so,		
	specify: No		
	Brief description of filing. (If fi Organization, specify	ling follows rates of an a	dvisory
	organization):		S contract; elimination and
	replacement of current endorsement		
	alone Condominium policy and NE		tion of Inflation Guard discount.
	*Adjusted to reflect all prior ra **Change in Company's prem	te changes. ium level which will resu	It from application of new
	rates.	Manage Date	
			perty & Casualty Ins. Co.
			me of Company
		Jenny Hester - Pro	
		•	Official – Title

Change in Compan revision effecti	y's premium or rate level produced to $1/6/10$ RB	by rate
(1)	(2) Annual Premium	(3) Percent
<u>Coverage</u>	Volume (Illinois)*	Change (+ or -)**
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Private Passenger Commercial	Auto RECEIVED	
3. Liability Other Than	Auto	
4. Burglary and Theft	RE	
5. Glass		
6. Fidelity	OCT 2 1 2009	•
7. Surety	061.27	
8. Boiler and Machinery	NOIS	
9. Fire	STATE OF ILLINOIS STATE OF ILLINOIS	
10. Extended Coverage	THENT OFIELD	
11. Inland Marine	STATE OF ILLINOIS STATE OF ILLINOIS DEPARTMENT OF INSURANOS SPRINGFIELD SPRINGFIELD	
12. Homeowners	5,288,769	0.0%
13. Commercial Multi-Per	11	
l4. Crop Hail L5. Other		
Line of Ins	ırance	
Does filing only apply to the so, specify: No	o certain territory (territories)or	certain classes?
Brief description of fillorganization, specify or	ling. (If filing follows rates of a	an advisory Superior Home discount,
Home Policy Plus discou	nt, Loss Experience Rating Plan, ear	rthquake rates
* Adjusted to reflect a ** Change in Company's p result from applicati	premium level which will	
	Metropolitan Property and Casual Name of Compa	lty Insurance Company
	-	•
	Richard Lonardo, Vice- Official - Tit	
129219D	Official - Tit	-TC

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Checked withko.

RECEIVED

DEC 16 2009

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective January 1, 2010.

STATE OF ILLINOIS DEPARTMENT OF INSURANCE SPRINGFIELD

(1)	(2)	(3)
	Annual Premium	Percent
<u>Coverage</u>	Volume (Illinois)*	Change (+ or -)**
1 Automobile Liability		
Private Passenger		
Commercial		
2 Automobile Physical Damage		
Private Passenger		
Commercial		
3 Liability Other Than Auto		
4 Burgulary and Theft		
5 Glass		
6 Fidelity		
7 Surety		
8 Boiler and Machinery		
9 Fire		
10 Extended Coverage		· · · · · · · · · · · · · · · · · · ·
11 Inland Marine		
12 Homeowners	875,000	3%
13 Commercial Multi-Peril		
14 Crop Hail		
15 Worker's Compensation		
16 Other		
Line of Insurance		
Line of madranee		
Does filing only apply to certain territory (terr	itories) or certain classes?	
If so, specify: No		
il so, specify.		
Brief description of filing. (if filing follows rate	s of an advisory	
organization, specify organization):	•	
Base rates for the Special class have been decreased.	Territory factors for the following class	es have
increased - Elite, Special, Class A, Class B, and Class C		
and about a second		
	Ω	

* Adjusted to reflect all prior rate changes

** Change in Company's premium level which will result from application of new rates.

Mount ('arroll

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

(1) Coverage	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
		- .
Automobile Liability Private Passenger Commercial		
Automobile Physical Damage		
Linkilla Otton Then Anda		
5 1 7 6		
Class		
Eidolitu		
Compt.		
- · · ·		
₽ !		
. Inland Marine		
2. Homeowners	\$11,754,745 (est.)	+5.0
L. Crop Hail		
Line of Insurance		
Line of histratice		
oes filing only apply to certain territory (terri	tories) or certain classes? If so, specifi	v: No.
to the state of th		
rief description of filing. (If filing follows rate		
omeowners base rate increase of 5.0%.		

Standard Mutual Insurance Company

Name of Company

Larry L. Boehm, CPCU, Assistant Underwriting Manager

Official – Title

RECEIVED

NOV 1 2 2009

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD

^{*}Adjusted to reflect all prior rate changes.

^{**}Change in Company's premium level which will result from application of new rates.

Revised

FORM (RF-3)

SUMMARY SHEET

(1)	(2)	(3)
()	Annual Premium	Percent
Coverage	Volume (Illinois) *	Change (+or-) **
Automobile Liability Private		
Passenger		
Commercial		
Automobile Physical Damag		
Private Passenger		•
Commercial		
Liability Other Than Auto		
Burglary and Theft		
Glass		
Fidelity		
Surety		
Boiler and Machinery		
Fire		
Extended Coverage		
Inland Marine		
Homeowners	\$3,025,343	+0.6%
Commercial Multi-Peril	40,020,010	
Crop Hail		
Other		*************************************
Life of Insurance		
Does filing only apply to certa	iin territory (territories) or	certain
Classes? If so,		
specify: No No		
Brief description of filing. (If f	iling follows rates of an a	advisory
Organization, specify	A d == # == = = £ 0000 A A I	O
organization):		S contract; elimination and
replacement of current endorseme		
alone Condominium policy and N		tion of inflation Guard discoun
*Adjusted to reflect all prior ra		ult from annihation of now
**Change in Company's prem	num level which will resu	iit from application of new
rates.	Teachers Insurance	re Company
		me of Company
	ina	ine of company

Change in Company's	s premium	or rate level	produced	bу	rate
Revision effective	02-9-10				

	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent Change (+ or -)**
1.	Automobile Liability Private Passenger Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		EIVED
3.	Liability Other Than Auto		36.
4. 5.	Burglary and Theft Glass	R	
5. 6.	Fidelity		DEC 0 3 LOIS NCE
7 .	Surety		OF ILLINGURARY
8.	Boiler and Machinery		STATENT OFIELD
9.	Fire		PARTMSPRINGFILL
10.	Extended Coverage		
11.	Inland Marine		
	Homeowners	\$ 902,389.00	+6.27%
	Commercial Multi-Peril		
	Crop Hail		
15.	Other Line of Insurance		
	Line of insurance		
	es filing only apply to certain te sses? If so, specify:	rritory (territories) or ce	rtain
org We	ef description of filing. (If filing anization, specify organization) are changing base rates across bilization Factor Rating Rule): s all forms as well as	Price

The Travelers Indemnity Company of America

Name of Company

Vice President

^{*} Adjusted to reflect all prior rate changes.

** Changes in Company's premium level which will result from application of new rates.

	(1)	(2) Annual Premium Volume (Illinois) <u>*</u>	(3) Percent <u>Change (+ or -)**</u>
	<u>Coverage</u>	Volume (minois)	Onlinge (. or 7
1.	Automobile Liability		
	Private Passenger		
2.	Commercial		
۷.	Automobile Physical Damage Private Passenger		LIVEU
	Commercial		ECEIT
3.	Liability Other Than Auto		RECEIVED
4.	Burglary and Theft		• 3UUA
5.	Glass		DEC 0 3 EULINOIS STATE OF ILLINOIS BEPARTMENT OF INSURANCE BEPARTMEN
6. -	Fidelity		TATE OF ILLINOURANCE
7.	Surety		STATENT OF LELD
8. 9.	Boiler and Machinery Fire		DENVIL SPRIN
9. 10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners	\$ 21,829,593.00	+6.38%
13.	Commercial Multi-Peril		<u> </u>
14.	Crop Hail		
15.	Other Line of Insurance		
Do cla	es filing only apply to certain sses? If so, specify:	territory (territories) or ce	rtain
D.	ef description of filing. (If fili	ng follows rates of an advi	sorv
	anization, specify organization		~ · · ·
We	are changing base rates acr	oss all forms as well as	
		le 420 with an impact of	

Travelers Personal Insurance Company

Vice President

Official - Title

Name of Company

result from application of new rates.

	(1)	(2) Annual Premium	(3) Percent
	<u>Coverage</u>	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		EIVED
3. 4.	Liability Other Than Auto Burglary and Theft	R	ECEIVED
5. 6.	Glass Fidelity		DEC 0 3 2009
7. 8. 9. 10.	Surety Boiler and Machinery Fire Extended Coverage		STATE OF ILLINOIS STATE OF INSURANCE DEPARTMENT OF INSURANCE
11. 12.	Inland Marine Homeowners	\$ 27,981,472.00	+6.26%
13.	Commercial Multi-Peril		
	Crop Hail		
13. 14. 15.	Crop Hail Other Line of Insurance es filing only apply to certain tesses? If so, specify:		ertain
13. 14. 15. Docclas No.	Crop Hail Other Line of Insurance es filing only apply to certain tesses? If so, specify:	follows rates of an adv	visory s Price
13. 14. 15. Docclas No. Briorg We Sta	Crop Hail Other Line of Insurance es filing only apply to certain tesses? If so, specify: ef description of filing. (If filing anization, specify organization are changing base rates acros	follows rates of an adv): s all forms as well as 420 with an impact of	visory s Price